



Docket No.: SON-1690  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Ichiro Fujiwara

Application No.: 09/431,076

Art Unit: 2811

Filed: November 1, 1999

Examiner: H. Vu

For: NONVOLATILE SEMICONDUCTOR MEMORY  
DEVICE AND PROCESS OF PRODUCTION  
AND WRITE METHOD THEREOF

**AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION**

MS Non-Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated November 3, 2003  
(Paper No. 22), please amend the above-identified U.S. patent  
application as follows:

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AMENDMENT TRANSMITTAL LETTER				Docket No. SON-1690	
Application No. 09/431,076-Conf. #8227		Filing Date November 1, 1999		Examiner H. Vu	
				Art Unit 2811	
Applicant(s): Ichiro Fujiwara					
Invention: NONVOLATILE SEMICONDUCTOR MEMORY DEVICE AND PROCESS OF PRODUCTION AND WRITE METHOD THEREOF					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	27	- 51 =		x	0.00
Independent Claims	2	- 6 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____ A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>18-0013</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 _____ Ronald F. Kananen Attorney Reg. No.: 24,104  RADER, FISHMAN & GRAUER PLLC 1233 20th Street, N.W. Suite 501 Washington, DC 20036 (202) 955-3750				Dated: <u>January 8, 2004</u>	

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